

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>XX</i>	<i>7091</i>	<i>8/27</i>
I.P.E. CLASSIFIER			<i>10 8-30-20</i>
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW		<i>60200706</i>	
			<i>2-5</i>

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)..... Canceled A Appeal
 :- Restricted O Objected

Claim	Date				
	Final	Original	7/11/02	1/10/03	8/12/03
1	✓	✓	✓	✓	✓
2	✓	✓	✓	✓	✓
3	✓	✓	✓	✓	✓
4	✓	✓	✓	✓	✓
5	✓	✓	✓	✓	✓
6	✓	✓	✓	✓	✓
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Claim	Date				
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If more than 150 claims or 10 actions
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